IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

Indexed	For office use only	
Audited		
Checked		
Compute	er	

Iowa Governor's Office	
Name of Department or Office	es Moines. IA 50319
ailing Address City, State, Zip Code	
515-281-5211 Area Code & Telephone No.	
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	CE:
Michael Boal	
Name	
Mailing Address (if different from above) michael.boal@iowa.gov	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)
Swallow Yan Name 3816 Ingersoll Ave Des Moines, IA 50312 Mailing Address City, State, Zip Code 515-988-0901 Area Code & Telephone Number Email Address (optional)	January 22, 2019 \$10.00 Date of Gift or Bequest Amount/Value* *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
Provide a description of the gift or bequest and purpose thereof: 2019 pop-up desk calendar	
Criteria to use this form: Receipt of any gift or bequest that is received by any department of the s	state or received by the Governor on behalf of the state.
tatement of Affirmation: Michael Boalaffirm that the gift or bequest reported above a sessment of the fair market value (if applicable) is correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and true to the base of the fair market value (if applicable) are correct and the correct and true to the base of the fair market value (if applicable) are correct and the correct and true to the base of the correct and true to the correct and t	e is accurate. I further affirm that the information concerning the donor and

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January 23, 2019

Date